## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10584769

|  |   |   |              |                                |              |                   |          | 10087767            |                        |               |                            |                        |  |
|--|---|---|--------------|--------------------------------|--------------|-------------------|----------|---------------------|------------------------|---------------|----------------------------|------------------------|--|
|  |   | CLAIMS A                                  |              | D - PART I                     |              | SMALL ENT<br>TYPE |          | TITY                | OR                     | OTHER SMALL E |                            |                        |  |
| U.S. NATIONAL STAGE FEES   |   |   | T (C0        | olumn 1)                       | (0           | Column 2)         | 7        | RATE                | FEE                    | ]             | RATE                       | FEE                    |  |
| BASIC FEE  |   |   |              |                                |              | <del></del>       | 1        | BASIC FEE           | -                      | OR            | BASIC FEE                  | 300                    |  |
| EXAMINATION FEE  |   |   | <del> </del> |                                |              |                   | 1        | EXAM. FEE           |                        |               | EXAM. FEE                  | 200                    |  |
| SEARCH FEE   |   |   |              |                                |              |                   | 1        | SEARCH FEE          |                        |               | SEARCH FEE                 | 400                    |  |
| FEE FOR EXTRA SPEC. PGS.   |   |   | minus 100 =  |                                |              | / 50 =            | 1        | X \$ 125 =          |                        |               | X \$ 250 =                 | 1,55                   |  |
| TOTAL CHARGEABLE CLAIMS  |   |   | 20           | minus 20 =                     | *            |                   | 1        | X \$ 25 =           | <del></del>            | OR            |                            | <del> </del>           |  |
| INDEPENDENT CLAIMS   |   |   | 1            | minus 3 =                      | *            | ,                 | 1        | X \$ 100 =          |                        | OR            | X \$ 200 =                 |                        |  |
| MULTIPLE DEPENDENT CLAIM PRE   |   |   | L<br>ESENT   |                                |              |                   | 1        | + \$ 180 =          |                        | OR            | + \$ 360 =                 |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |              |                                |              | lumn 2            | ا لـ     | TOTAL               |                        | OR            | TOTAL                      | 900                    |  |
| _  | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST |   |              |                                |              |                   | <b>,</b> | SMALL ENTITY        |                        |               | OTHER THAN OR SMALL ENTITY |                        |  |
| A TN   |   | REMAINING<br>AFTER<br>AMENDMENT           |              | NUM<br>PREVIC<br>PAID          | BER<br>OUSLY | PRESENT<br>EXTRA  |          | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT  | Total   | *   | Minus        | **                             |              | =                 | ]        | X \$ 25 =           |                        | OR            | X \$ 50 =                  |                        |  |
| AME  | Independent   | *   | Minus        | ***                            |              | =                 | ]        | X \$ 100 =          |                        | OR            | X \$ 200 =                 |                        |  |
|  | FIRST PRES  | SENTATION OF M                            | ULTIPLE D    | DEPENDENT                      | CLAIM        |                   | ]        | + \$ 180 =          |                        | OR            | + \$ 360 =                 |                        |  |
|  |   |   |              |                                |              |                   | _        | TOTAL ADDIT.<br>FFF |                        | OR            | TOTAL ADDIT.<br>FFF        |                        |  |
|  |   | (Column 1)                                |              | (Colur                         |              | (Column 3)        |          |                     |                        |               |                            |                        |  |
| NT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA  |          | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| NDMENT   | Total   | *   | Minus ·      | ##                             |              | =                 | ]        | X \$ 25 =           |                        | OR            | X \$ 50 =                  |                        |  |
| AMENI  | Independent   | *   | Minus        | ***                            |              | =                 | ] [      | X \$ 100 =          |                        | OR            | X \$ 200 =                 |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA                                  |   |              |                                | CLAIM        |                   | ] [      | + \$ 180 =          |                        | OR            | + \$ 360 =                 |                        |  |
|  |   |   |              |                                |              |                   | _        | TOTAL ADDIT.        |                        | OR            | TOTAL ADDIT.               |                        |  |
|  | FIRST PRES  | SENTATION OF N                            | IULTIPLE C   | PEPENDENT (                    | <u>CLAIM</u> |                   | ] [      |                     |                        |               | TOTAL /                    | ADDIT.                 |  |

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.